

DISCLOSURE SUMMARY PAGE

FORM
DR-2
(Rev. 01/98)DISCLOSURE
REPORT

For Office Use Only

Comm. #
Indexed

Audited

Computer

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

IMPORTANT: Indicate type of committee you are reporting for: ☒ 2

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Jan. 19 REPORT FOR AN/A ☒ (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one ☐ ☒

☐ CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a Notice of Dissolution is filed.)

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$

749.64

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

705.00

Schedule F: Loans Received total (Attach Schedule F)

- 0 -

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

- 0 -

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

319.92

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$

1,134.72

UNPAID BILLS (From Schedule D - Attach Schedule D)

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/5/07	ID# CK#	<i>Jean David Sawyer 606 N. Riverview Dr. Bellevue, Ia 52031</i>	15. ⁰⁰	\$ 15. ⁰⁰	<input type="checkbox"/>
10/23/07	ID# CK#	<i>Dorothy Camp 1547-1410th Ave North Bryant, Ia 52727-9639</i>	5. ⁰⁰	5. ⁰⁰	<input type="checkbox"/>
10/23/07	ID# CK#	<i>Nalake Baker 1712-9th St N.W. Clinton, Ia 52732</i>	15.00	15. ⁰⁰	<input type="checkbox"/>
10/31/07	ID# CK#	<i>Doris Carstensen 2008 726 Scenic Dr. Clinton, Ia 52732 Donator</i>	25.00 25.00	50.00	<input type="checkbox"/>
12/1/07	ID# CK#	<i>Mary Hamann 2008 Mbr. 379B-123 Ave Magnetite, Ia 52060</i>	20. ⁰⁰	20. ⁰⁰	<input type="checkbox"/>
	ID# CK#	<i>Joan Langan 2008 406 Ridgcrest Dr Clinton, Ia 52732</i>	10. ⁰⁰	10. ⁰⁰	<input type="checkbox"/>
	ID# CK#	<i>Carolyn Grimes 2008 530-36th Ave Clinton, Iowa 52732 Donator</i>	20.00 10.00 (air)	30. ⁰⁰	<input type="checkbox"/>
	ID# CK#	<i>Lillian Vining 320 Ruthledge Dr Clinton, Ia 52732 2008</i>	10.00 10.00	10. ⁰⁰	<input type="checkbox"/>
	ID# CK#	<i>Joan Albrich 823-7th Ave S Clinton, Ia 52732</i>	20.00	20. ⁰⁰	<input type="checkbox"/>
	ID# CK#	<i>Esther Piller 2008 814-13th Ave No. Unit 6B Clinton, Ia 52732</i>	20.00	20. ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$195.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of (for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

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12/1/07	ID# CK#	Marilyn Clausen 839-113th Ave No. 242-1129 Clinton, Ia 52732	Assoc. Donor	\$10.00	<input type="checkbox"/>
	ID# CK#	Mildred Haack 1138-10th Ave No. Clinton, Ia 52732	2008 Assoc. Donation	10.00 15.00	<input type="checkbox"/>
	ID# CK#	Bette Oakley 1140 Woodlawn Clinton, Ia 52732	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Dionne Kaczinski 1209-25th Ave No. Clinton Iowa 52732	Assoc. Donor	10.00	<input type="checkbox"/>
	ID# CK#	Dorothy Camp 1547-1410th Ave Bryant, Ia 52727-9639	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Lee Tugane 1001-7th Ave So. Clinton, Ia 52732	2008 Donor (Cash)	20.00	<input type="checkbox"/>
	ID# CK#	Dee Crockett 83 Orchard Lane Clinton, Ia 52732	2008 Donor (Cash)	20.00	<input type="checkbox"/>
	ID# CK#	Elizabeth Schofield 2337-13th Ave Clinton, Ia 52732	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Dorothy Hick 3503 Pershing Blvd. Clinton Ia 52732	Assoc. Donor 10.00 Donation 10.00	20.00	<input type="checkbox"/>
	ID# CK#	Lara Klein 4213-220th St. Clinton Ia 52732-8944	2008 Donor	20.00	<input type="checkbox"/>
SUB-TOTAL				\$185.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

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12/4	ID# CK#	Diane Casady 3110 Hartwell Rd. Clinton, Ia 52732	2008 Dues	\$ 20.00	<input type="checkbox"/>
	ID# CK#	Mary Mangano 222 B-320th Ave. Dewitt, Ia 52742	2008 Dues	20.00	<input type="checkbox"/>
12/9/07	ID# CK#	Barbara Kraymann 4086-170th Street Clinton, Ia 52732	2008 Dues 5 Donation	25.00	<input type="checkbox"/>
	ID# CK#	Sherry Jensen 582 Bradley Pt. Dr. Clinton, Ia 52732	2008 Dues	20.00	<input type="checkbox"/>
	ID# CK#	Pat Phipps 1121-26th Ave No. Clinton, Ia 52732	2008 Dues 20.00 Donation 10.00	30.00	<input type="checkbox"/>
	ID# CK#	Luella Anderson 3518 N. 3rd St. Clinton, Ia 52732	2008 Dues 20.00 Donation 5.00	25.00	<input type="checkbox"/>
	ID# CK#	Elizabeth Gussak 308 So. Bluff Blvd. Clinton, Ia 52732	2008 Dues 10.00 Donation 10.00	20.00	<input type="checkbox"/>
	ID# CK#	Ruth Scribner Regency Apt 116 839-13th Ave No. Clinton, Ia 52732	2008 Dues 20.00 Donation 5.00	25.00	<input type="checkbox"/>
	ID# CK#	Judith Altesee 3415 Valley Oaks Drive Clinton, Ia 52732	2008 Dues	20.00	<input type="checkbox"/>
	ID# CK#	Diakies, Stang 1721-5th Ave. So. Clinton, Ia 52732	2008 Dues	20.00	<input type="checkbox"/>
SUB-TOTAL				\$225.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

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12/1/07	ID# CK#	Williamina McLaughlin 1219 N. 3rd St. Clinton, Ia 52732	2008 Donor	\$ 20.00	<input type="checkbox"/>
	ID# CK#	Kay Harold 1926 Highland Ct. Clinton, Ia 52732	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Lynn Talty 3614-9th St. Camanche, Ia 52730-9609	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Jean Davidsover 606 N. Riverview Belleue, Ia 52031	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#	Throne Johnson 1169-432nd Ave. P.O. Box 68, Andover, Ia 52701	2008 Donor	20.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$100.00

TOTAL (if last page of this schedule)

\$705.00

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(for Schedule A)

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-17-07 1319	ID# CK# 1319	1st District Rep. Women 90 Carolyn Pallett 1315 7th St. N.W. Clinton, Ia 52732	Dues 3 mbrs. @ .35 ea	\$ 1.05
7-17-07	ID# CK# 1320	Karen McAlister Iowa Federation of Rep. Women 3717-190th St. Farragut, Ia 51639-4000	Dues 3 mbrs @ 10.00 ea	30.00
10/23/07	ID# CK# 1321	Diane Cassaday 3110 Harts Mill Road Clinton, Ia 52732	Reimbursement Stamps, Prints	21.69
12/7/07	*ID# break in CK. # CK# 1421	Diane Cassaday 3110 Harts Mill Rd. Clinton, Ia 52732	Stamps	32.80
12/7/07	ID# CK# 1422	Paul Ulbrich 823-7th Ave So. Clinton Ia 52732	Reimbursement Speaker's Lunch	7.00
12/31/07	ID# CK# 1423	Krumpetel Restaurant 1320-11th St. N.W. Clinton, Ia 52732	Lunch expense for membership/ Christmas Luncheon	227.38
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$319.92
TOTAL (if last page of this schedule)				\$319.92

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

* Break in check #'s due to
checkbook being audited.

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